

Elimination of "B" Level Training

The California Department of Health Services (DHS) would like to notify all "A" level Certified Application Assistants (CAAs) that have provided "B" level training, that "B" level certificates will no longer be issued.



This policy change is an effort by DHS to ensure that all CAAs receive consistent training and provide accurate Program information and application assistance to families.

Any individuals that would like to receive "A" level training may contact the Certified Assistant HELP line at 1-888-237-6248 to request a "Certification Training Request Form". They will be notified when certification training becomes available in their chosen location.

Application Assistance Helpful Hints

Here are some helpful hints for increasing the application assistance payment:

- Verify that the entire application has been filled out **completely and correctly**. Double-check to make sure the child's name, sex and correct date of birth are entered.
- Fill out Section 9 **completely and neatly**. (Print numbers clearly)
- Although it is not required, including the Social Security Number for all children and pregnant women applying for Medi-Cal increases the probability for payment.
- All children in the same family should be indicated on the same application.
- The AAPU or Healthy Families (EDS) is not allowed to release eligibility information to an Enrollment Entity or Certified Application Assistant. Eligibility information can only be obtained by contacting the family directly.

"Refresher" Training for A-Level Certified Application Assistants Available!

There have been many changes in the program since 1998 and now that we are in the third year of the program, the Department of Health Services has authorized "refresher" trainings for A-level CAAs. These half-day regional sessions will greatly enhance the skills of A-level CAAs. B-level CAAs are encouraged to enhance their skills by attending a full-day state-sponsored A-level session. The half-day refresher course will:

- Clarify information.
- Bring CAAs "up to date" on the most recent version of the application and the Reference Manual.
- Discuss "frequent errors" on applications.

To register you may contact the CAA Help Line toll-free at 1-888-237-6248. You will be notified when a training has been scheduled in your region.



IMPORTANT DISTRIBUTION INFORMATION FOR LINKED CAA STAFF

This bulletin is provided only to enrollment entities. You are responsible for sharing this bulletin with your linked CAA staff. This information is needed to correctly complete applications and reduce payment denials.

RHA'S CAA HELP Line
1-888-237-6248

Monday - Friday 8:00 a.m. to 5:30 p.m.

Technical assistance for **CAAs** and **EEs** with family composition and income calculations; request an ITP and/or training; order enrollment and marketing materials; or provide change of address information.

Healthy Families Information Line
1-800-880-5305

Monday - Friday 8:00 a.m. to 8:00 p.m.

Technical assistance for **applicants** who need general information about the HF program; answers to specific income and documentation questions when completing the application themselves; status information on their own completed and submitted application.

EEs may no longer use this line to check the status of an application on behalf of an applicant unless the applicant is present at the time the call is made.

HF/MCC General Information
1-888-747-1222

Monday - Friday 8:00 a.m. to 8:00 p.m.

Operators will provide assistance to **anyone** requesting *general* information for both Healthy Families and Medi-Cal for Children, and referral information to local EEs by county. Families requesting up to four applications and handbooks may call this line to order.

EE Reimbursement and Information
1-888-747-1222

and press the star (*) key

Monday - Friday 8:00 a.m. to 5:00 p.m.

This line is for **EEs ONLY** who want to obtain information about the reimbursement process or to inquire about the status of their reimbursement. EEs will need to provide their EE number and CAA number for the person who provided the application assistance.

CA Kids *NEW* Phone Number
1-818-461-1400

Please note: CA Kids has changed their phone number.

January 1, 2001 Elimination of Quarterly Status Report Requirement

The State of California and the Department of Health Services, under the leadership of Governor Gray Davis, continue to work towards reducing barriers and retention of benefits for Medi-Cal beneficiaries.



Currently, Medi-Cal beneficiaries are mailed a form requiring beneficiaries to report changes in assets, income and family status on a quarterly basis. Many eligible Californians lose health benefits when a quarterly status report is incomplete, not returned by the beneficiary or lost in the mail. In these circumstances, a person or family would have to re-apply for Medi-Cal as new applicants.

All this is about to change. Effective January 1, 2001, the requirement of quarterly status reporting will be eliminated.

It will still be the beneficiaries responsibility to report, within 10 days, any information that may affect their Medi-Cal eligibility such as changes in family composition, income or property.

The elimination of quarterly status reporting will reduce a barrier for the retention of health benefits resulting in healthier Californians.

HF/MCC Buttons Help Authenticate Your Program Participation

In the 1998-1999 program year, the state produced Healthy Families and Medi-Cal for Children program buttons to be used at public relations events. Small quantities of these buttons are still available for use by CAAs as a way to identify themselves as application assistants during community outreach or school enrollment events, and to encourage people to ask for more information about Healthy Families or Medi-Cal benefits for their eligible children.

Buttons, available in 9 languages, (English inventory has been exhausted) may be ordered in small quantities by calling the Certified Assistant HELP Line at 1-888-237-6248. Quantities are limited, so order yours today!



Kaiser Permanente Steps Plan

The “Steps Plan” is for former Kaiser patients who lost health coverage due to certain events such as loss of employment, divorce or death of a spouse, or loss of no-cost Medi-Cal. If a family’s income is too high to qualify for federal or state-funded programs, such as Medi-Cal or Healthy Families, Kaisers new plan may be just right. Kaiser created the Steps Plan to give families the opportunity to grow into an affordable health plan.

To be eligible for the Kaiser Permanente Steps Plan, a family must be a current or previous Kaiser Permanente member and:

- Must reside within the Kaiser Permanente California service area.
- Must meet our income criteria. (see chart below)
- Must not be eligible for MRMIP, Medicare, no-cost Medi-Cal, or Healthy Families.
- Must not be eligible for subsidized coverage through your spouse or employer.

A family may be eligible for the Steps Plan...

If their family size and income fall within one of the following ranges.

(These are subject to change.)

Family Size	And annual income falls between
1	\$8,350 and \$25,050
2	\$11,250 and \$33,750
3	\$14,150 and \$42,450
4	\$17,050 and \$51,050

For more information about the Steps Plan call 1-800-255-5053 or visit

www.Kaiserpermanente.org/locations/california/steps-index.html

Healthy Families/Medi-Cal for Children Campaign Launches Fotonovelas

The California Department of Health Services and Managed Risk Medical Insurance Board are pleased to introduce a new and innovative Spanish-language outreach tool to help support your efforts with the Latino community entitled, “Historias de la Vida.” Two Spanish-language publications, called a *Fotonovela*, have been developed to help educate and raise awareness among the Latino community about the state’s *two* health care coverage programs just for kids.

The story line for the *fotonovela* details the realistic experiences of Latino families who have had difficulties accessing health care for their children. The families’ concerns, such as eligibility for programs, cost of the programs, income levels, immigration status are addressed in the fotonovelas. The publications also include information to help dispel myths and remove barriers associated with applying for the programs.

Each *fotonovela* illustrates a different family’s personal story, and works together to help educate families about eligibility for both Healthy Families and Medi-Cal for Children programs. In the first *fotonovela* the parents learn that their children are eligible for the Healthy Families program. The family in the second *fotonovela* apply for health coverage for their children and their children are found to be eligible for Medi-Cal.

Copies of both issues of “*Historias de la Vida*” are available to organizations free of charge for use in local outreach efforts. The back cover of the *fotonovelas* have space for your organization to customize the fotonovelas with an address label or rubber stamp. The fotonovela is tabloid size (10 _” x 13 _”) and is printed only in Spanish. (Organizations may order a maximum number of 2000 copies of each fotonovela).

Orders will be filled upon receipt based on current inventory. Please note we cannot send orders to a post office box. To order, fax the attached order form request to Gloria Alvarez at (323) 263-9169 and specify the number of copies of each of the fotonovelas desired, the organization name, contact name, phone number and your organization’s mailing address. All orders will be shipped at the State’s expense via UPS or similar carrier. Or, for faster delivery at your own expense, please provide your Fed-Ex, UPS, or USPS Express Mail account number on your faxed order. Act now while supplies last!

New Healthy Families Handbook

A new handbook will be available December 2000. Please make sure that you request new handbooks in order to have the most current information for you and your clients. The current handbook is dated June 2000. You can call the CAA HELP line at 1-888-237-6248 to order the December 2000 handbooks.

If you have older editions of the Healthy Families Handbook, please ensure they include the Erratas pertaining to Enrollment Cap for Kaiser and Extended coverage for Molina, New Legal Immigrants and Transfer Changes for Health Plan subscribers. Please see the following articles for details.

Enrollment Limit for Kaiser

Kaiser Permanente has reached its enrollment limit for new Healthy Families applicants in the counties of Alameda, Contra Costa, Los Angeles, Marin, Orange, Riverside, San Bernardino, San Diego, San Francisco, San Mateo and Santa Clara until further notice.

Kaiser Permanente will not accept any new members in these counties at this time. The Healthy Families Program apologizes for any inconvenience this may cause you and/or your clients.

Zip Code Expansion for Molina

Molina Medical Centers has extended its availability for enrollment in the Healthy Families Program in Riverside County. Molina will now accept new members living in Riverside County in the ZIP codes of 92260-64, 92270, 92276, 92282, 92320, 92373, 92501-09, 92513-19, 92530-32, 92539, 92543-46, 92548-49 and 92552-57.

Health Plan Application Assistance

During the recent legislative budget process for FY 2000/2001, the Administration and the Legislature agreed to allow participating health plans to assist potential applicants in applying for the HFP/ Medi-Cal for Children (MCC) under certain limited circumstances, with the goal of reducing the number of uninsured children in California. Each participating health plan is required to submit a proposed plan for providing application assistance to the Managed Risk Medical Insurance Board (MRMIB) for approval. A participating health plan employee or other representative who provides application assistance is required to complete a certified application assistant training class that is approved by MRMIB and the Department of Health Services.

Allowable Circumstances for HFP/MCC Participating Health Plans to provide Application Assistance

The HFP participating health plans' assistance would be limited to:

- Applicants who telephone, write or contact the plan in person at the plan's place of business; at a community public awareness event that is open to all participating plans in the county; or at any other site approved by the board; or
- Applicants who have an existing relationship with the participating health plan through Healthy Families Program, Medi-Cal Managed Care, COBRA continuation coverage or employer sponsored coverage under the specific circumstances spelled out in the statute;
- Applicants completing the HFP's annual eligibility review process in order to retain health care coverage for subscribers enrolled in that participating health plan.

New Legal Immigrants Continue Healthy Families Enrollment

This year (2000), the State of California has provided funding to continue coverage for new immigrants (qualified immigrants who entered the U.S. after August 22, 1996) in the Healthy Families Program as well as allow eligible new immigrants to enroll in the Program.

REMEMBER: For immigrants who legally entered the U.S. prior to August 22, 1996, but have an immigration adjustment status on or after August 22, 1996, please send copies of immigration documents showing a legal date of entry prior to August 22, 1996.



Healthy Families Program Interactive Voice Response System

On October 16, 2000, the Healthy Families Program (HFP) implemented the first phase of the new Interactive Voice Response (IVR) system. This new feature expands the customer services options available to applicants who use the mail-in Medi-Cal for Children and Pregnant Women and Healthy Families Program application. The IVR feature can be accessed by calling the 1- 800- 880-5305 and using a touch tone telephone.



At this time, the IVR system allows callers to inquire about the status of applications that have been received at Single Point of Entry within the last 120 days. The IVR system is currently available in English and Spanish between the hours of 7:00am and 9:00pm, every day of the week.

Applicants now have the option of either speaking with a Customer Care Representative (CCR), available Monday-Friday 8:00 a.m.-8:00 p.m. or using the IVR system when calling the toll-free number. They may choose one of three options to access information on the status of their application. These include using: 1) their (applicant's) home telephone number; 2) their family member number; or 3) their application reference number. The caller is asked to verify their account by entering the five-digit zip code of their residence. After two unsuccessful attempts the caller is transferred to a CCR (in the appropriate language queue).

The IVR system provides callers with information on when their application was received by SPE (i.e., still pending); children eligible for Healthy Families; children not eligible for Healthy Families; and children forwarded to Medi-Cal. For confidentiality reasons all children are identified as "Child with Birth Date [Child 1 Birth Date]".

Application Received

If an application has not yet been processed, the caller receives the message, "We have received your application on [Date]".

If the application is in the application process, they receive the message, "Your application is being processed. Please call back in two days to find out if you have health coverage through Healthy Families."

If additional information is needed to complete the processing of an application, the caller receives the message, "We need more information from you to process your application." And the call is transferred to a CCR, in the appropriate language queue.

Children Eligible for the Healthy Families Program

For child(ren) eligible for the HFP, the caller receives the message, "The person/persons with the following birth date [Child 1 Birth date]" is enrolled in the Healthy Families Program and "person with birth date [person birth date 1] is enrolled effective [effective date for person 1]." The IVR also provides the caller with information for eligible unborns and children who have been pre-enrolled.

Children Not Eligible for Healthy Families Program

For children not eligible for the HFP, the caller receives the message, "The person/persons with the following birth date(s) will not be enrolled in the Healthy Families Program" and "Person with birth date [Person Birth Date 1]".

Child Forwarded to Medi-Cal

For applications forwarded to the Medi-Cal Program, the caller receives the message, "Per your request the person/persons with the following birth date was forwarded to the Medi-Cal Program on [Medi-cal Forward Date]" and "person with birth date [Person Birth Date1] Application forwarded on [Medi-Cal Forward Date]. For those persons forwarded to the Medi-Cal Program, please allow 45 days for your Local county Social Services Office to process your Medi-Cal application. The [County Name] county Social Services Office's phone number is [number].

The caller always has the option to repeat the status of an application. At the end of the message, the caller can either stay on the line and be transferred to a CCR, in the appropriate language queue, or hang-up.

MRMIB is continuing to work with the HFP Administrative Vendor, EDS, to develop additional options and languages that can be added to the IVR system.

Payment Inquiry Tips

Getting ready to send in a *Request for Reimbursement Information Form*? Please verify the following before faxing in any payment inquiries:

- All Request for Reimbursement Information Forms should be filled out ***completely and neatly!***
- Payment inquiry information will only be released to the *contact person* for the Enrollment Entity. CAAs should forward all payment questions through the contact person.
- Before faxing in any payment inquiries, double check that an invoice has not been paid previously.
- Do not submit a payment inquiry until the invoice is showing as “*denied*” on the Monthly Payment Report. (*HF invoices can stay in the pending status for up to 80 days and MC invoices can stay in the pending status for up to 120 days.*)
- Remember... a child/pregnant woman may be found eligible for Medi-Cal, yet without the SS# on the application, it still can result in a payment denial.

Healthy Families and Medi-Cal for Children Custom Print Ads Available!

The Healthy Families and Medi-Cal for Children customizable print ads are still available! The customizable print ads are camera-ready and have a blank space to include your organization name, address and telephone number.



These ads can easily be placed as advertisements in your local newspaper or photocopied for flyers, posters, and newsletter inserts. The black and white ads are available in five languages (English, Spanish, Chinese, Vietnamese and Cambodian).

All orders should be directed to Runyon Saltzman & Einhorn, attention Tania Palafox at (916) 446-9909, ext. 262 or via E-mail at: tpalafox@rs-e.com. Call or E-mail today to order your copies!

Fair Play Benefits the Applicants and the Community

The California Department of Health Services (DHS) would like to remind EEs and CAAs who provide outreach and enrollment assistance that the goal of the program is to secure healthcare benefits for uninsured, eligible children. Acting on behalf of the State, your personal goal should be to provide fair, complete, and competent service to enroll eligible children. It is important to remember the following guidelines.

- **Contract EEs, active enrollment entities, their subcontractors, and community coalitions/collaboratives are prohibited from promoting or showing any preference for a specific provider or health plan.** Discrimination against a potentially eligible family on the basis of the family’s choice of providers, health, dental, or vision plans is a violation of the program regulations, however, providing factual information comparing providers and plans is encouraged to assist the applicant in making an educated choice.
- **EEs and CAAs should never charge an applicant for services rendered, and must never handle money or premium payments from an applicant.**
- **EEs may not answer phones with the greeting, “Healthy Families” but may state their organizations’ name first and then “Healthy Families”.**
- **CAAs should note that due to state liability it is prohibited to offer to transport an applicant to your site or elsewhere.**



Following these guidelines will achieve the goal to help screen families for eligibility and complete the application properly while ensuring that applicants obtain the benefit of developing a preventive care relationship with the doctor of their choice. Failure to follow these guidelines, as outlined on the Entity and RHA Agreement may result in the disenrollment of your organization’s authorized participation in the program. DHS or an authorized appointee will review complaints and may provide a thirty-day written notice of termination.